

OCT 25 2004

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

10845-148

First Named Inventor

Bruce S. Kristal

COMPLETE IF KNOWN

Application Number

10/820,184

Filing Date

04/07/2004

Art Unit

1614

Examiner Name

N/A

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**COMPOSITIONS AND METHODS FOR PROTECTING AGAINST MITOCHONDRIA
COMPONENT-MEDIATED PATHOLOGY**

(Title of the Invention)

The specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

04/07/2004

as United States Application Number or PCT International

Application Number

10/820,184

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]


Person Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

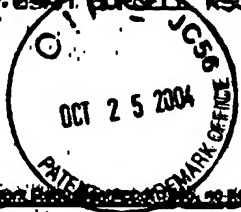
PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0551-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label	26486	OR <input type="checkbox"/>	Correspondence address below
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Address					
City		State		ZIP	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this Unsigned inventor		
Given Name Bruce S. (first and middle (if any))			Family Name Kristal or Surname		
Inventor's Signature 			Date 9/8/04		
Residence: City White Plains		State NY	Country USA	Citizenship US	
Mailing Address 801 Mamaroneck Avenue, #103					
City White Plains		State NY	ZIP 10605	Country USA	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Robert (first and middle (if any))			Family Name Friedlander or Surname		
Inventor's Signature			Date		
Residence: City Brookline		State MA	Country USA	Citizenship USA	
Mailing Address 112 Dudley Street					
City Brookline		State MA	ZIP 02445	Country USA	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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PTO-850 (08-03)

Approved for use through 08/12/05; OMB 0591-0025
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 3
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Date		Date	
Inventor's Signature		Date	
Residence: City	State	County	Citizenship
305 E. 6th Street	NY	USA	US
Mailing Address			
New York			
City	State	Zip	Country
	NY	10022	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Date		Date	
Inventor's Signature		Date	
Residence: City	State	County	Citizenship
Mailing Address			
New York			
City	State	Zip	Country
	NY	10022	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Date		Date	
Inventor's Signature		Date	
Residence: City	State	County	Citizenship
Mailing Address			
New York			
City	State	Zip	Country
	NY	10022	USA

This collection of information is required by 35 U.S.C. 116 and 37 CFR 1.122. The information is required to obtain or retain a patent by the public which is to be used by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is subject to the Privacy Act and the Freedom of Information Act. Any changes, including printing, preparing, and submitting the completed application form to the USPTO, must be made by the inventor. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEE OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

If you need assistance in completing the form, call 1-800-PTO-6199 (1-800-769-6199) and select option 2.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
with Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 10845-148

First Named Inventor Bruce S. Kristal

COMPLETE IF KNOWN

Application Number 10/820,184

Filing Date 04/07/2004

Art Unit 1614

Examiner Name N/A

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**COMPOSITIONS AND METHODS FOR PROTECTING AGAINST MITOCHONDRIA
COMPONENT-MEDIATED PATHOLOGY**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

04/07/2004

as United States Application Number or PCT International

Application Number

10/820,184

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label **26486** OR ☐ Correspondence address below

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Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name **Bruce S.**
(first and middle (if any))

Family Name **Kristal**
or Surname

Inventor's
Signature

Date

Residence: City **White Plains**

State **NY**

Country **USA**

Citizenship **US**

Mailing Address **801 Mamaroneck Avenue, #103**

City **White Plains**

State **NY**

ZIP **10605**

Country **USA**

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name **Robert**
(first and middle (if any))

Family Name **Friedlander**
or Surname

Inventor's
Signature *Robert Friedlander*

Date **9/8/04**

Residence: City **Brookline**

State **MA**

Country **USA**

Citizenship **USA**

Mailing Address **112 Dudley Street**

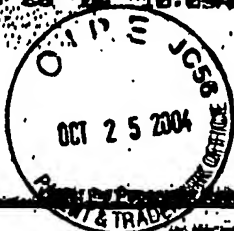
City **Brookline**

State **MA**

ZIP **02445**

Country **USA**

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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PTO/CSO (03-03)
Approved for use through 09/10/03, GAO 03-1033
U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE
Notice: For Patent applications filed on or after 09/10/03, a copy of this form must be submitted with the application.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Residence Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Residence Address			
City	State	Zip	Country
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Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Residence Address			
City	State	Zip	Country

This declaration of inventorship is required by 35 U.S.C. 115 and 37 CFR 1.22. The information is required to obtain or retain a patent by the inventor who is to be listed by the PTO in an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This declaration is submitted to the PTO to establish inventorship, prepare, and prosecute the application for a patent in the USPTO. This is very important to the inventor. Any changes to the inventorship of the application should be made by the inventor and the PTO. The inventor should be listed in the Official Information Office of the Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

If you need assistance in completing the form, call 1-800-PTO-5199 (1-800-768-5199) and select option 2.

Approved for release 10/13/02. OADR 0851-5537

U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE
This collection of information from Customs is not a valid Child control number.

Attorney Docket Number 1004-145

First Named Inventor **Bruce S. Kristal**

COMPLETE UNKNOWN

Application Number 10/820,184

Filing Date 04/07/2004

Art Unit 1614

Estimated Net/ea	N/A
------------------	-----

The below named Inventor, I hereby declare that:

My name, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

(Title of the invention)

the identification of which

is attached here to

ON

was filed on (MM/DD/YYYY)

04/07/2004

as United States Application Number or PCT International

Amendment Number	10/820.184	and was amended on (MM/DD/YYYY)	(If applicable).
------------------	------------	---------------------------------	------------------

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by the amendment specifically referred to above.

Applicant has the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which becomes available between the filing date of the prior application and the national or PCT filing date of the continuation-in-part application.

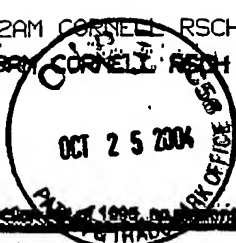
Indicate by check (☐) whether the application is a claim for foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority	Certified Copy Attached?	
			Not Claimed	Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign registration numbers are listed on a supplemental priority data sheet **PTO/SB022** attached hereto:

[Page 1 of 2]

Estimate Your Submission: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the content of this form are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patent, Washington, DC 20231.**



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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label		25486		OR <input type="checkbox"/> Correspondence address below	
Name							
Address							
City		State		ZIP			
Country		Telephone		Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Bruce S. First and middle (if any)				Family Name Kristal or Surname			
Inventor's Signature				Date			
Residence: City White Plains		State NY		Country USA		Citizenship US	
Mailing Address 801 Mamaroneck Avenue, #103							
City White Plains		State NY		ZIP 10605		Country USA	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Robert First and middle (if any)				Family Name Friedlander or Surname			
Inventor's Signature				Date			
Residence: City Brookline		State MA		Country USA		Citizenship USA	
Mailing Address 112 Dudley Street							
City Brookline		State MA		ZIP 02445		Country USA	
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s); PTO/SB/02A attached hereto.							

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PTO/US-204

Approved for use through OCT 10, 2004. GPO: 2004-500-0000
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

This form is provided for the use of inventors who are not U.S. citizens or residents and who are not U.S. citizens or residents of the United States.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 115 and 37 C.F.R. 1.52. The information is required in order to obtain a patent by the public which is to be used by the USPTO to process an application. Confidentiality is covered by 35 U.S.C. 122 and 37 C.F.R. 1.14. This collection is necessary to allow the inventor to claim, working drawings, preparing, and submitting the completed application form to the USPTO. There are very important upon the inventor's name. Any inventor or the inventor of the invention who is not a U.S. citizen or resident of the United States should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1400, Alexandria, VA 22313-1400. DO NOT SEND FILES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1400, Alexandria, VA 22313-1400.

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